### MISSOURI DEPARTMENT OF HEALTH STATE PUBLIC HEALTH LABORATORY DATAMASTER MAINTENANCE REPORT

BREATH ALCOHOL PROGRAM

JUN -9 2009

Complete this reports repaired Send co	rt in duplicate at the tir py to Department of Hea	ne of the lith; retain	regular mo original in	onthly preventive maint department file.	enance check, and	whenever instrument		
DATAMASTER SN					DATE OF IN	SPECTION 509		
204193 127313 LOCATION OF INSTRUMENT (STREET AND CITY)						PECTION		
Vernon County Jai	1 '	149						
CHECKLIST: Place in observed values v	a check (≺) to the left of where determined.) Unch	of each ite necked iter	m if found ns must be	to be satisfactory or if corrected before using	operating within esinstrument.	tablished limits. (Write		
☑ DIAGNOSTIC	CHECK (PRINTOUT AT	TACHED)						
☑ COMPUTE	R	. 22/2//		DETECTOR				
✓ PROGRAM			· · · · · · · · · · · · · · · · · · ·	☑ FILTERS				
☑ HEATERS	☑ HEATERS SAMPLE CHAMBER 49 °C [				☑ QUARTZ STANDARD			
☑ FLOW DET					☑ CALIBRATION			
PUMP HIG	H SPEED		PRINTER	Ø PRINTER				
☑ INDICATOR LI	IGHTS							
☑ TIME AND DA	TE				WAY TO SERVICE THE	-		
SIMULATOR T	EMPERATURE (34 °C ±	0,2°C)	34.20	<u> </u>				
CALIBRATION Run three test spread of .005 RECIRCULAT	ts using a standard sol or less. Check the box	ution. All correspor	three tests ading to th	s must be within ± 5% e standard solution bei	of the standard ving used. (PRINTO	alue and must have a UT ATTACHED) (USE		
☑ 0.100% STA	ANDARD - MUST READ ANDARD - MUST READ TANDARD IS TO BE US	BETWEEN	≬ 0.038% aı	nd 0.042% INCLUSIVE				
TEST 1 📂 🔑	101	TEST 2	No.	./01	TEST 3	-101		
PERFORM R.F.I. TEST (PRINTOUT ATTACHED)								
NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)								
		.0509)	0	1, ,	(.1519) O	(Over .19) ()		
and within establis	and describe any alter hed limits (use other sid is operating within Der	e if necess	ary)	pecifications. Mo	VED TO HEW			
Guth Laboratories Solution Lot # 08340 RepCo Marketing Solution Lot#			Expiration /D~15~09 Expiration					
INSPECTING OFFICER				PRINT NAME				
> /.w./ -				J.W. Krehbiel				
TYPE II PERMIT NUMBER/EXPIRATION DATE 820246 8-13-10				(417) 895-6868	(417) 895-6868			
	HILL THE	ANEOU	L OPPORTUNITY	AFFIRMATIVE ACTION EMPLOYER		Lab1		



### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 08340 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain 0.1211 percent (w/vol) ethyl alcohol. The expiration date for this lot number is October 15, 2009 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.10 percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President GUTH LABORATORIES, INC.

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# **BAC DataMaster** Evidence Ticket

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Face This Side Down - This Edge In First

# **BAC DataMaster Evidence Ticket**

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SOUTH CHINESESSING THE

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\* 6001F . F b 174.75%

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Operator Signature\_

2208-02

perator Signature,

### Face This Side Down - This Edge In First

### BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY COTOO! BEC DATAMASTER SERIAL NUMBER 204193 96/85/89

ARREST TIME: 14.98
SUBJECT NAME:
TEST
DOB: 18/18/98
STATE/D.I.: MO/987
ARRESTING OFFICER:
VOFURTE! N.I/II
OFFICER I.D.: NR
TESTING OFFICER:
VOFURTE! N.I/II
OFFICER I.D.: 66//
OFFICER I

-- RECOYU GMM VOYO .....

ровто тытроссовые

Operator Signature

2208-0

### State of Missouri DEPARTMENT OF HEALTH



## TYPE II



### JASON KREHBIEL

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

### DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

08/13/08	Time C. Ostanh			
820246	Director of State Public Health Laboratory			
08/13/2010				
Expires	- Director, Department of Health			
MO 590.0771 /7-88\	I ah A (D7 90)			

MO 580-0771 (7-88)

Lab. 4 (R7-88)